PTO/SB/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number				
CLAIMS AS FILED – PART I (Column 1) (Column 2)								SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY		
	FOR		NUMBE	NUMBER FILED NUMBE		R EXTRA		RATE	FEE		RATE		EE
BASIC FEE (37 CFR 1.16(a))				, and a second s					\$	OR	TOTIC	s	
TOT	AL CLAIMS CFR 1.16(c))			minus 20 = •				x \$ =	<u>`</u>		x s =		=
INDEPENDENT CLAIMS (37 CFR 1.16(b))				minus 3				x \$ =		OR OR	X \$ =		
	TIPLE DEPENDE	NT CL						+s =		OR			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR				
								TOTAL) OK	TOTAL	<u> </u>	
CLAIMS AS AMENDED - PART II OR OTHER THAN										N			
			olumn 1)		(Column 2)	(Column 3)	ımn 3)	SMALL E	NTITY	OR	SMALL		
ENT A	D	RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE ·	TIC	DDI- DNAL EEE
W	Total (37 CFR 1.16(c))	.	43	Minus	" 43	=		x s 9 =		OR	x s <u>/8</u> =		
AMENDMENT	Independent (37 CFR 1.16(b))		1	Minus	··· 3	=		× \$ <u>44</u> =		OR	× \$ 8 =		
AN	FIRST PRESENT	ATION	OF MULTIPLE	DEPEND	ENT CLAIM (37 CF	R 1.16(d))		+ \$ <u>/50</u> =		OR	+ s 300 =		
								TOTAL ADD'L FEE	1	OR	TOTAL ADD'L FEE		
		(C	olumn 1)		(Column 2)	(Column 3)							
AMENDMENT B		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIC	ODI- ONAL EE
	Total (37 CFR 1.16(c))	•		Minus	**	=		x \$ <u>9</u> =		OR	x s_/8 =		
	Independent (37 CFR 1.16(b))	•	_	Minus	***	=		x \$ <u>44</u> =		OR	x \$ 89 =		
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$ <u>/50</u> =		OR	+ \$300 =		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(C	olumn 1)		(Column 2)	(Column 3)							
ENT C		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- DNAL EE
DME	Total (37 CFR 1.16(c))			Minus	**	=		x s_9 _=		OR	× s_ <i> 8</i>] =		
AMENDMENT	Independent (37 CFR 1.16(b))	•		Minus	***	=		x s <u>44</u> =		OR	× s <u>/8</u> =		
ΑÑ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ s <u>/5</u> 2 =		OR	+ \$3000 =		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". 													

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

06 600,003221

211001110 00100011, 2001											
	 	CLAIMS AS	S FILED - PART (Column 1)		(Column 2)		SMALL ENTITY TYPE		OTHER TO		
TOTAL CLAIMS			24				RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC F	E 370.00	OR	BASIC FEE	740.00
TC	TAL CHARGE	ABLE CLAIMS	∫ √ minus 20=		* 4		X\$ 9=		OR	X\$18=	12
INE	DEPENDENT C	LAIMS		inus 3 =	* 1		X42=		OR	\	
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				+140=		1		
* If the difference in column 1 is less than zero, enter "0" in column					column 2	TOTAL	 	OR OR		812	
CLAIMS AS AMENDED - PART II								` L	1011		
·····		(Column 1)	(Column 2) (Column 3)				SMALI	ENTITY	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	* 24	Minus	** (29	=	X\$ 9=		OR	X\$18=	
AME	Independent	* 2 INTATION OF MU	Minus	***	<u>32.</u>]=	X42=		OR	X84=	
	THOTTHESE	INTATION OF MIC	DETIPLE DEI	PENDEN	CLAIM		+140=	T	OR	+280=	
							TOTA ADDIT. FEI		OB	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	ADDIT: 1 CI	- 	a.	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	· 23	Minus	* 0	14	- 3	X\$ 9=		OR	X\$18=	11.00
	Independent	* 2 NTATION OF ML	Minus	***	3		X42=		OR	X84=	1
	·	INTATION OF MIC	LIPLE DEF	ENDENT	CLAIM		+140=		OR	+280=	2002
							TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	34.00
		(Column 1)		(Colur	nn 2) ¯	(Column 3)					2/
 		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total	* 43	Minus	* 3	3	= / 0	X\$ 9=		OR	X\$18=	1220
	Independent	*	Minus	***	3	=	X4 2 =		OR	X8 6 =	000
1	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	CLAIM		+14 9 €		OR	+ 29 0=	
* #	the entry in colur	nn 1 is less than the	e entry in colu	mn 2, write	"0" in col	umn 3.	TOTAL			TOTAL	1

ADDIT. FEE

ADDIT. FEE

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** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."